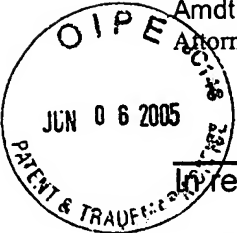


IFW

Appl. No. 10/730,860
Amdt. dated June 3, 2005
Attorney Docket No.: MCRVT-001BC



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Application of: Rosenbluth, et al.)
)
Application No. 10/730,860)
)
Filed: December 9, 2003)
)
For: Embolectomy Catheters and)
Methods for Treating Stroke and)
Other Small Vessel Thromboembolic)
Disorders)

Art Unit: 3731

Examiner: Dawson, G.

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Transmittal Letter

Dear Sir:

- ☒ In accordance with Rule 136, the Commissioner is hereby petitioned for a **three (3)** month extension of time, extending to **June 3, 2005** the period for response to the Office action dated **December 3, 2004**. Check No. 3785 for \$515.00 is enclosed.
- ☐ Enclosed is a certified copy of Serial No. _____ from which priority is claimed in the subject case pursuant to 37 CFR ' 1.55b and 35 U.S.C. ' 119.
- ☐ Enclosed is an Assignment of the invention to [Assignee], including a cover sheet and Check No. [Assignment Check No.] for \$40.
- ☐ A Declaration of Inventorship and Limited Power of Attorney is enclosed.
- ☐ A Certificate of Ownership and Power of Attorney is enclosed.
- ☒ Enclosed herewith is an amendment/response for filing in relation to the above-identified application. Entry consideration of this amendment/response is requested.

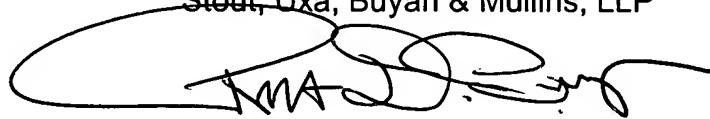
- ☐ Check No. 3785 is enclosed covering the additional filing fees in the amount of \$510.00. This check covers the required extension of time fee of \$510.00. No additional claim fee is seen to be due based on the following calculation:

| For | (Col. 1) No. Filed | (Col. 2) No. extra | Small entity Rate | Fee | Or | Other than a Small entity Rate | Fee |
|---------------------------------------|-----------------------|-----------------------|----------------------|-------|----|--------------------------------------|-------|
| Basic fee | | | | \$150 | Or | | \$300 |
| Examination fee | | | | \$100 | Or | | \$200 |
| Search Fee | | | | \$250 | Or | | \$500 |
| Total claims | 10 | - 20 = | 1 | x 25 | Or | x 50 | \$ |
| Indep claims | 2 | - 3 = | 0 | x 100 | Or | x 200 | \$ |
| _ Multiple dependent claims presented | | | | + 180 | Or | + 360 | \$ |
| Total | | | | \$0 | Or | Total | \$ |

- ☒ The Commissioner is hereby authorized to charge any underpayment and credit any overpayment of the filing fees required under 37 CFR §1.16 and any patent application processing fees required under 37 §CFR 1.17 to Deposit Account No. 50-0878.

Respectfully submitted,
Stout, Uxa, Buyan & Mullins, LLP

Date: June 3, 2005



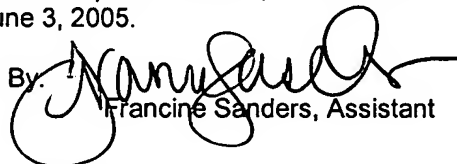
Robert D. Buyan, Reg. No. 32,460

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Irvine, CA 92618
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email: rbuyan@patlawyers.com

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on June 3, 2005.

Dated: June 3, 2005

By: 
Francine Sanders, Assistant